Fill in	this inforn	nation to identify your case:			
Debtor	: 1	Savanna Michelle Je			
		Full Name (First, Middle, Last	)		
Debtor					
(Spouse	e, if filing)	Full Name (First, Middle, Last			
United	States Ba	nkruptcy Court for the	SOUTHERN DISTRICT OF MISSISSIPPI		an amended plan, and
					sections of the plan that
	umber:	25-00832		have been char	iged.
(If know	n)			3.2, 3.5, 5.1	
Chap	ter 13 I	Plan and Motions fo	r Valuation and Lien Avoidance		12/17
Part 1:	Notice	S			
To Deb	otors:	indicate that the option i	as that may be appropriate in some cases, but the pass appropriate in your circumstances or that it is perrules and judicial rulings may not be confirmable. For in this plan.	rmissible in your judicia	al district. Plans that
		In the following notice to	creditors, you must check each box that applies		
To Cre	ditors:	Your rights may be affect	eted by this plan. Your claim may be reduced, modi	fied, or eliminated.	
		You should read this plan an attorney, you may wish	carefully and discuss it with your attorney if you have a to consult one.	one in this bankruptcy ca	ase. If you do not have
		to confirmation on or be	treatment of your claim or any provision of this pla fore the objection deadline announced in Part 9 of t e Bankruptcy Court may confirm this plan without Rule 3015.	the Notice of Chapter 13	Bankruptcy Case
		The plan does not allow c	aims. Creditors must file a proof of claim to be paid u	nder any plan that may be	e confirmed.
		plan includes each of the	y be of particular importance. <b>Debtors must check on</b> following items. If an item is checked as "Not Incluive if set out later in the plan.		
1.1	1		d claim, set out in Section 3.2, which may result in at all to the secured creditor	<b>✓</b> Included	☐ Not Included
1.2	Avoida		possessory, nonpurchase-money security interest,	☐ Included	<b>✓</b> Not Included
1.3	_,	dard provisions, set out in	Part 8.	☐ Included	<b>✓</b> Not Included
Part 2:	Plan P	ayments and Length of Pla	n		1
rare 2.	1 1411 1	ayments and Bength of the			
2.1	Length	of Plan.			
fewer th		nths of payments are specific	months, not to be less than 36 months or less than 6 ed, additional monthly payments will be made to the experience.		
2.2	Debtor	(s) will make payments to t	he trustee as follows:		
			semi-monthly, weekly, or bi-weekly) to the dissued to the debtor's employer at the following address		otherwise ordered by
		Tyson Foods Inc			
	-	2200 Don Tyson Pkwy			
	-	Springdale AR 72762-00	200		

Debtor	Sa	avanna Michelle Jenkin	IS	Case number	25-00832	
Joint Deb court, an (		pay ( monthly, certing payment shall be issue	semi-monthly,  weekly, or ued to the joint debtor's employed	bi-weekly) to the chapter	13 trustee. Unless otherwis:	e ordered by the
	_					
2.3	Income t	ax returns/refunds.				
		that apply Debtor(s) will retain any e	xempt income tax refunds rec	reived during the plan term.		
		Debtor(s) will supply the treturn and will turn over to	rustee with a copy of each inco the trustee all non-exempt in	come tax return filed during t acome tax refunds received d	he plan term within 14 days uring the plan term.	of filing the
		Debtor(s) will treat income	e refunds as follows:			
2.4 Addit		ments.				
Check	_	None. If "None" is checke	d, the rest of § 2.4 need not b	e completed or reproduced.		
Part 3:	Treatme	ent of Secured Claims				
3.1	Mortgag	es. (Except mortgages to	be crammed down under 11	U.S.C. § 1322(c)(2) and ide	entified in § 3.2 herein.).	
✓	None. If	that apply. f "None" is checked, the re al claims as needed.	est of § 3.1 need not be comple	eted or reproduced.		
3.2	Motion f	or valuation of security, p	payment of fully secured cla	ims, and modification of un	dersecured claims. Check	one
			d, the rest of § 3.2 need not b agraph will be effective only		1 of this plan is checked.	
	<del></del>	amounts to be distributed t at the lesser of any value s	ale 3012, for purposes of 11 Use holders of secured claims, of et forth below or any value seddline announced in Part 9 of	debtor(s) hereby move(s) the et forth in the proof of claim.	court to value the collateral Any objection to valuation s	described below shall be filed on
		of this plan. If the amount treated in its entirety as an	d claim that exceeds the amou of a creditor's secured claim unsecured claim under Part 5 I on the proof of claim control	is listed below as having no votof this plan. Unless otherwise	value, the creditor's allowed se ordered by the court, the	claim will be
Name of	creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
CarMax Finance		\$8,669.81	2017 Kia Optima 158356 miles	\$7,582.50	\$7,582.50	10.00%
Name of	creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
Family Choice		\$1,194.45	Household Goods	\$850.00	\$850.00	10.00%

Debtor	Sava	inna wichelle Jenkins		Case numb	oer _	25-00832	
Insert a	dditional claim	as as needed.					
#For mo	obile homes and	d real estate identified in § 3	3.2: Special Claim fo	or taxes/insurance:			
-NONI	Name of cree	ditor	Collateral	Amount per mo	nth	Beginning month	
* Unles	s otherwise ord	lered by the court, the intere	st rate shall be the c	urrent Till rate in this District			
For vel	nicles identified	d in § 3.2: The current milea	ge is				
3.3	Secured clai	ims excluded from 11 U.S.	C. § <b>506</b> .				
Che	ck one. ✓ No:	<b>ne</b> . If "None" is checked, th	e rest of § 3.3 need	not be completed or reproduc	ed.		
3.4	Motion to a	void lien pursuant to 11 U.	S.C. § 522.				
Check o							
	<b>√</b> No:	<b>ne.</b> If "None" is checked, th	e rest of § 3.4 need	not be completed or reproduc	ed.		
3.5	Surrender o	of collateral.					
	The that	e debtor(s) elect to surrender t upon confirmation of this p	r to each creditor lis plan the stay under	11 U.S.C. § 362(a) be terminat	ecures the	the creditor's claim. The debtor(s) requests the collateral only and that the stay the disposition of the collateral will be	
Morto	n Finance Co	Name of Creditor		Household Goods	C	ollateral	
Philly	Finance			Household Goods			
	Finance er Finance			Household Goods Household Goods			_
weave	errinance			Household Goods			_
Insert a Part 4:	dditional claim  Treatment	s as needed.  of Fees and Priority Clain	ıs				
4.1		es and all allowed priority cle petition interest.	aims, including don	nestic support obligations othe	r than th	hose treated in § 4.5, will be paid in full	
4.2	Trustee's fee	es es are governed by statute an	nd may change durin	ng the course of the case.			
4.3	Attorney's f	ees.					
	✓ No look f	fee: <b>4,000.00</b>					
	Total att	torney fee charged:	\$4,000.00		-		
	Attorney	y fee previously paid:	\$0.00		-		
		y fee to be paid in plan per ation order:	\$4,000.00		-		
	☐ Hourly fe	ee: \$ (Subject to appro	oval of Fee Applicat	tion.)			

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4.4	Priority claims other than attorney's fee	and those treated in § 4.5.
	Check one.  ✓ None. If "None" is checked, the r	est of § 4.4 need not be completed or reproduced.
4.5	Domestic support obligations.	
	None. If "None" is checked, the	est of § 4.5 need not be completed or reproduced.
Part 5:	Treatment of Nonpriority Unsecured C	aims
5.1	Nonpriority unsecured claims not separa	
<b>*</b>	providing the largest payment will be effect.  The sum of \$ 100.01 % of the total amount of these claim.	
		ed under chapter 7, nonpriority unsecured claims would be paid approximately \$0.00 payments on allowed nonpriority unsecured claims will be made in at least this amount.
5.2	Other separately classified nonpriority u	nsecured claims (special claimants). Check one.
	None. If "None" is checked, the r	est of § 5.3 need not be completed or reproduced.
Part 6:	<b>Executory Contracts and Unexpired Le</b>	ises
6.1	The executory contracts and unexpired leases are rejections of the contracts and unexpired leases are rejective.	eases listed below are assumed and will be treated as specified. All other executory ed. Check one.
	None. If "None" is checked, the	est of § 6.1 need not be completed or reproduced.
Part 7:	Vesting of Property of the Estate	
rait /.	vesting of 1 Toperty of the Estate	
7.1	Property of the estate will vest in the deb	cor(s) upon entry of discharge.
Part 8:	Nonstandard Plan Provisions	
8.1	Check "None" or List Nonstandard Plan None. If "None" is checked, the	Provisions est of Part 8 need not be completed or reproduced.
Part 9:	Signatures:	
complete	address and telephone number.	nust sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their
	Savanna Michelle Jenkins	X Signature of Debtor 2
	vanna Michelle Jenkins gnature of Debtor 1	Signature of Debtor 2
Ex	ecuted on May 30, 2025	Executed on
40	65 King Rd.	
	dress rest MS 39074-0000	Address
	y, State, and Zip Code	City, State, and Zip Code

Debtor	Savanna Michelle Jenkins	Case number	25-00832
Telepl	hone Number	Telephone Number	
X /s/ Th	nomas C. Rollins, Jr.	Date <b>May 30, 2025</b>	
Thom	nas C. Rollins, Jr. 103469		
Signat	ture of Attorney for Debtor(s)		
P.O. I	Box 13767		
Jacks	son, MS 39236	_	
Addre	ess, City, State, and Zip Code		
601-5	500-5533	103469 MS	
Telepl	hone Number	MS Bar Number	
trollir	ns@therollinsfirm.com		
Email	Address	_	